

AN ADDRESS:
DELIVERED TO THE GRADUATES
OF THE
LONG ISLAND COLLEGE HOSPITAL,
BROOKLYN, N. Y.,
AT THE
ANNUAL COMMENCEMENT,
ON THE
EVENING OF JULY 24th, 1860,

BY
AUSTIN FLINT M. D.,

PROFESSOR OF PATHOLOGY AND PRACTICAL MEDICINE IN THE LONG ISLAND COLLEGE HOSPITAL;
AND OF CLINICAL MEDICINE AND PATHOLOGY IN THE NEW ORLEANS SCHOOL OF MEDICINE.

PUBLISHED BY THE GRADUATING CLASS.

Brooklyn:
WILTON, BOOK AND JOB PRINTER, CORNER COURT AND JORALEMON STS.,

1860.

July 24th.

PROF. FLINT,

Dear Sir :

The students of the graduating class of the Long Island College Hospital feel themselves highly favored by your parting address, and wishing to have the privilege of recurring to its kind admonitions in future years, hope you will grant them the favor of a copy for publication.

P. C. PEASE, Chairman,
CHAS. O'LEARY, Secretary,
FOWLER PRENTICE,
R. K. BROWNE,
R. McMAHON.

GRAMERCY PARK HOUSE. }
July 25, 1860. }

To Drs. PEASE, O'LEARY, PRENTICE, BROWN, and McMAHON, Committee.

Dear Sirs :

In compliance with the request so kindly expressed in your note of the 24th inst., I take pleasure in placing the manuscript of my address at your disposal.

With my best wishes,

I remain,

Most truly yours,

AUSTIN FLINT.

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1860

Folio # 2148, no. 5

GENTLEMEN, GRADUATES :

THE appointment to address you on this occasion, gives me the privilege of being the first after my distinguished friend, the President of the Medical Council, to salute you by the professional title which has just been conferred upon you. The Council, Faculty and Regents of the Long Island College Hospital have adjudged you worthy to be admitted as members of the medical profession. You have been formally constituted Doctors in Medicine. The diplomas which you have received authorize you to assume this title. You are thereby legally qualified to practice the several branches of the art of healing, and you are entitled to share in whatever honors and privileges belong to the body of which you are now a part. Hitherto your relations with the officers of this Institution have been those which the pupil sustains to the master. The period of your subordination is now ended. We are no longer your governors and teachers. Henceforward we are brethren. On behalf of the Institution which it is my agreeable duty to represent on this occasion, I bid you welcome to the ranks of the profession. In offering the first salutations as Doctors in Medicine, I proffer most cordially, on the part of the Council and Faculty, the right hand of fellowship. We congratulate you on having attained to the position to which your efforts have been so long directed, and we fervently wish you success

in all the ends of honorable ambition connected with the professional life into which you are about to enter.

To the officers and friends of the Long Island College Hospital, the present occasion is one of peculiar interest. The medical school connected with this Institution was organized within the past year. This commencement-day marks the close of the first session for medical instruction. The organization was effected only a little more than three months prior to the beginning of the session. The undertaking was, of course, an experiment. The result has more than fulfilled the expectations of those most sanguine of success. A class of fifty-eight medical students has been assembled during the session just ended, exclusive of a number of graduates of other schools who have matriculated and devoted more or less time to the courses of instruction in this Institution. Of this class I have the honor to address twenty-one upon whom has been conferred the degree of Doctor in Medicine. The present success is an earnest of the future. It has demonstrated that a medical school in the City of Brooklyn, holding its sessions during the spring and summer months, will be sustained and encouraged by the medical profession of this country. It has shown that medical students in distant and widely separated portions of our country, and even without the limits of our country, will be led hither by the educational advantages which this Institution is able to offer. The undertaking is no longer an experiment. It remains only to be fully prepared for future success. To this end will be directed the energy which has created the Institution. The students assembled here at the next session will find enlarged lecture rooms, and more ample accommodations for the prosecution of anatomy and other branches of medical study. Measures have been already taken to add largely to the museum and to increase in various ways the means and appliances of medical teaching. The opportunities for clinical instruction will be extended; in short, it is the determination

of those who have identified themselves with the undertaking, that the claims of the Institution upon their time, labor and means shall be recognised not the less because its success is already proven, and its future prosperity secure.

Circumstances connected with the organization and management of the Long Island College Hospital School are peculiar. I may be permitted on this occasion to introduce this subject, and to refer to those who were directly instrumental in founding the School, since, in behalf of the Faculty I cannot appropriate the credit of originating the enterprise. In this respect the origin of this School differs from that of most of the medical institutions of our country. Our medical colleges have generally been established mainly through the efforts of those who hold professorships and participate in certain benefits to be derived from medical teaching. This has been in some sort a necessity, inasmuch as the public take too little interest in medical education to originate or provide, of their own accord, for educational establishments. The fact has furnished occasion for the reproach that the founders of schools of medicine are actuated solely by self-interest, and most of our institutions have had to encounter active opposition from a part of the medical profession in the places where they have been established, together with more or less popular prejudice. In many, if not most instances, the imputation of unworthy motives is unjust. It is not unbecoming to strive for a position of usefulness and distinction as a medical teacher, more than to aim to be useful and distinguished in medical practice. But, waiving discussion of this point, it is a peculiar feature of this School that it has been instituted and is now managed by medical men who have no intention of engaging personally in the business of instruction. To the members of the present Council, in conjunction with the board of Regents, the School owes its existence, and its success is in a great measure due to their exertions. The Council, as you are aware, is composed of four medical gentle-

men. With these gentlemen the members of the class have been brought into constant intercourse, not in the capacity of medical teachers, but as friends and counselors. I know that I speak the sentiments of every graduate and student when I say that thoughts of the pleasure and profit derived from the intimate relations which have existed between the class and Council, will be cherished among the most agreeable of the reminiscences of the past session. The members of the Council have given freely of their time, talents and means to establish a medical school in connection with the College Hospital. They have made it what it now is, and they are pledged to each other to make it all that it is capable of becoming. Why have they done this? Certainly not for any selfish objects. Holding as they do already, positions in this community to which nothing is to be added, they are actuated by the disinterested desire to build up an institution which will be an honor to the City of Brooklyn; an institution which the medical profession of the city will regard with satisfaction and pride; an institution which will contribute to the advancement and diffusion of medical knowledge, and thereby tend to promote the great ends of philanthropy—life, health, happiness. To my mind it is a beautiful feature of this Institution that it has enlisted the interest and energies of such men as compose its Council. They might have chosen an enterprise more conspicuous than this, for it is rarely the case that the public take much cognizance of what is done for medical education; but in the prosperity and usefulness of the Institution they will find their reward; and in its perpetuity and character the names of *Mason*, *Dudley*, *Mitchell* and *Henry*, in conjunction with the names of the distinguished gentlemen who compose the Board of Regents, will long outlive the period of their useful labors.

For you, gentlemen, graduates, this commencement-day has an interest which will be fully appreciated by those only who can judge from their own experience. It is interesting as an

end and a beginning. Three years ago, or longer, you decided to adopt the medical profession. Since that important decision you have been looking forward to this day as the epoch when student-life ends and professional-life begins. It has long been prominent in your anticipations, and it will never cease to hold a conspicuous place in your retrospections. It is a joyous day, for it marks the accomplishment of a great object; let us hope that the professional career of each of you will be such as to lead you always to recur to it with pleasure! This will depend on your success in accomplishing the objects of life now before you. So far as present attainment affords a basis for future expectations, your teachers are confident that you will do honor to the school under whose sanction you have entered the medical profession. On the part of the Faculty and Council, I am happy to say that we are proud of the first alumni of the Long Island College Hospital. We are well satisfied to have the character of our Institution represented by the graduates of 1860. I say this with as much sincerity as pleasure, not for the sake of compliment, but because it is due alike to the Institution and to yourselves. And let me express the hope that to other and stronger incitements to exertion for future success, may be added a desire to reflect credit on your alma mater.

I have thus briefly and imperfectly given expression to some of the sentiments which this occasion suggests. Something more than this is incumbent upon me. A good custom calls for a few words of sober counsel, in connection with the exercises which are to sever finally our official relations. There are many topics which are pertinent to the occasion. In giving direction to my thoughts I have imagined myself placed in your position after the temporary effervescence of mind incident to the present important epoch in your lives, has subsided. Human life is made up of a succession of objects, great or small, sought for with more or less earnestness, sometimes with, but oftener

without success. You have reached an important object in life in having been admitted as members of the medical profession. Now what is the next important end to which your efforts will be directed? Is it not success in the profession into which you have just entered? *Professional success* is the object which you will place before you so soon as you are prepared to gird your loins for a fresh struggle. This, then, is the theme which I have chosen for some parting words. What constitutes success in the medical profession, and how is it to be obtained? These questions cover a wide field of discussion; I can devote to them only a few remarks.

I assume that you have entered the profession with a view to the exercise of its practical duties. To obtain practice is then a prime condition of success. You must have charge of the sick in order to increase your knowledge of disease, to prevent diversion of your minds to other subjects than those which relate to your profession, and to acquire confidence and tact as practitioners. These are advantages which have nothing to do with pecuniary compensation. I need not say that you cannot expect to elect, at first, the class of patients which you might prefer. You must take those who are willing to accept you. These will be in the humbler walks of life. Our profession may be truly said to be rooted in charity. The growth of a medical practice generally begins in what may be called in one sense, a sterile soil; but it takes deeper and stronger root than if it were planted in rich ground, and subjected to hot-bed forcing. Most of the practitioners who have in the end been most successful, have been content to serve for a time chiefly those whom the illustrious Boerhave called his best patients, since God was their pay-master. Let me advise you not to commence your professional life with the determination to avoid, as much as possible, business which does not pay. A poor practice not only prepares for, but in various ways leads to a good practice. If you settle in large towns, you will do well to become con-

nected, as soon as practicable, with dispensaries and other public institutions for the relief of the sick; and if in the country, do not hesitate to answer promptly and cheerfully calls when your services must be rendered without fee, and often without thanks. I advise this course on the score of policy. Your labors will have their reward; but it is pleasant to think that actions which self-interest would prompt, are not the less charitable in their character. While you are laying the foundation for future success, you are dispensing to the needy from the resources of our art.

The practice, however, which you will be able to obtain in the early part of your professional career is only a stepping-stone to success. It does not constitute success. You must have patients who are able to pay for your services. In other words, a *poor practice* should in due time give place to a *good practice*. How is the latter to be obtained? There are honest and dishonest methods of acquiring medical business. There is a high-minded, honorable course, and there are means and disreputable ways of striving for patients. I shall assume, at once, that you will aim to be successful by fair and legitimate means alone. It is unnecessary for me to read you a homily on ethics. It would be a poor compliment to the intelligence of physicians to say that they are liable to commit acts of immorality and impropriety through ignorance. The principles which should govern the conduct of medical men are not more difficult to be comprehended, nor do they differ essentially from those which all men understand and are equally bound to obey. But there are certain mistakes into which the young practitioner is liable to fall, perhaps unwittingly. With reference to some of these I will offer a few hints derived from personal observation and experience.

It has been correctly said that to be successful in acquiring practice, the physician must want it. It is not enough to need it. The inconveniences arising from the want of it may be

keenly felt, and, yet, it may not be wanted; and, on the other hand, it may be much wanted, although not needed. In short, the physician to be successful must be fond of the exercise of his profession. It is not uncommon for practitioners to say that they like the study, but dislike the practice of medicine. They who feel thus are not likely to be over-burthened with numerous patients. Medical services rendered with evident dissatisfaction, or with indifference, are not acceptable. It is important to the young physician to cultivate, from the start, a love for the practical duties of his calling, and learn to overlook annoyances from which it is not exempt more than any other pursuits in life. Medicine practiced *con amore* is capable of affording as much enjoyment, to say the least, as any occupation involving mental and physical activity; but as a drudgery it would be difficult to select a penance more repulsive. If a distaste for medical practice cannot be overcome, the sooner it is abandoned the better. In a true attachment to the practice of the profession lies, in not a few instances, the secret of professional success.

Acquaintances and friends are essential to the success of the physician. In order to succeed he must be known and appreciated. It will not do therefore to live the life of a recluse. The community will not take the trouble to dig him out of seclusion, and insist on discovering his good qualities. He must make himself known; and, hence, habits of social intercourse and a disposition to mingle with the world are to be encouraged to a certain extent. The importance of this line of policy is apt to be sufficiently appreciated, and there is danger of its being pushed to an injudicious extreme. It is a great mistake to suppose that success is promoted by giving up much time to society. Persons do not become prepossessed in favor of the practitioner who is constantly met in the ball-room or theatre. Even the devotees of fashion are apt not to prefer the services of the physician who is devoted to the frivolities

of fashionable life ; and in the estimation of others this tells strongly against the professional character. It is a common impression that a physician who is over fond of social enjoyments, be they ever so innocent, is wanting in attachment to his profession, and will be likely to neglect his patients. It is unsafe, indeed, so far as professional success is concerned, to become greatly engrossed in subjects foreign to medical practice, whether they relate to politics, theological dogmas, public enterprises, moral reforms, or aught else which, however interesting or important in themselves, have nothing to do with the cure of the sick.

It is a still greater mistake to suppose that the cultivation of convivial friendships will contribute to practice. Aside from the danger of intemperance, and the damage inflicted upon the character of the young practitioner by even the suspicion of a proclivity to dissipation, they who prize him as a boon companion, generally give preference to another in the sick-room. The man who is too fond of the cup, rarely trusts with confidence his family or himself in sickness to the care of one whom he knows to have a similar feeling. I was interested in an account recently given me by an old practitioner, of his own experience in illustration of the fact just stated. He settled early in life in a community in which intemperance was rife, having previously resolved never to accept an invitation to join in the social glass. His resolution was soon put to the test. On the occasion of the first important case to which he was called, numerous friends of the patient were assembled, the decanter was brought forward and he was asked to drink. At that time and place to decline was regarded almost in the light of a personal affront. His refusal was met with the remark that the young doctor felt himself above companionship with his neighbors. He saw that he must define clearly and decidedly his position. He did so, explaining that so far from being actuated by pride it was rather self-distrust

which led him to resolve to adopt a course to secure the full possession of his faculties for the exercise of his profession. The company could not but express approbation of the propriety of the stand he had taken. The decanter remained untouched. His manly independence secured the friendship of those who were at first disposed to be offended. The trial was over. He was never asked again to drink, and in its moral effect his position was worth a score of formal lectures on temperance. There were not wanting however persons who scoffed at the young temperance physician. But it was not long before he was summoned to visit the most vociferous and influential of these, whose family physician was a man of intemperate habits. He could not forbear expressing surprise at his services being requested. "Well," said the patient, "to be frank with you, I know that I am a drunkard, but I am sick and I need the services of a sober doctor." My friend who gave me this account ranks among the most eminent of the physicians of one of our southern States.

In seeking to make yourselves known, I need hardly caution you against means of acquiring notoriety which are not only contemptible but impolitic. It is not often that the youthful aspirant for business, drives about with no purpose save to appear to be professionally busy; ties his horse before stately mansions to impress passers-by with the belief that his patients are of the better class; procures himself to be called out of church or to be proclaimed as wanted at the door of a crowded assembly. Shallow tricks like these are transparent enough, and no patients worth having are ever caught by them. Such things afford occasions for good-natured jests, at which the profession can afford to laugh as well as others. Yet we do see instances not infrequently in which physicians yield to the weakness of desiring to make themselves noted by talking of the number of their patients, mentioning the names of prominent persons to whom they have rendered professional services,

identifying themselves conspicuously with cases which attract public attention, and in other ways too numerous to mention. It is enough to say of silly practices like these that they effect very little, while they disgust alike professional brethren of better taste and the more intelligent members of every community.

Certain plans for securing medical practice more efficient than these, are to be interdicted as inconsistent with self-respect and a proper regard for the character of the profession. In this class may be mentioned the prostitution of social attentions to this object. Well managed efforts either personally or through the agency of wives and relatives to bestow civilities where an obligation will be felt to reciprocate by accepting professional services, undoubtedly often succeeds, but in the long run this is an impolitic as well as an unworthy course. I have blushed for my profession when I have heard it said (as I have repeatedly) by persons who have removed into new places of abode, that the first to welcome them were the families of physicians, the motive being well understood. Be assured that patients thus entrapped generally feel a sense of imposition. They are not like the patients who become so from deliberate choice. It often requires constant efforts to keep the patients acquired in this manner, while they are secure whose confidence is voluntarily bestowed. Let me tell you, gentlemen, in this connection, that a *good practice* means something more than a fair number of paying patients. It means a circle of intelligent friends who will appreciate your services and on whom you can rely. With such patients the relations of the physician often develop the purest and sweetest enjoyments of life—enjoyments which it is almost a sacrilege to associate with mercenary considerations. Such patients are not often won by cunning intrigues, or preserved by paltry artifices.

I would impress upon you the fact that the means of acquiring and keeping practice, have reference especially to the pro-

fessional intercourse of the physician with his patients. The secret of making yourselves favorably known, is to have the knowledge of your professional character come from those who are acquainted experimentally with your qualifications for success. The true battle-field of the practitioner is the sick room. It is here that he not only strives to conquer disease, but decides his own fate as regards professional success. Exclusive of medical knowledge and skill (and of these I do not now speak), I believe that a line of conduct the most consistent with uprightness, candor and self-respect will be found to be the best policy.

It is a mistake to suppose that an attitude of servility conduces to success. A high-minded man or woman will not be prepossessed or gratified by a mean obsequiousness on the part of a physician; and with the low-bred it excites contempt. The duties of the physician teach him considerateness and kindness; but our profession has become proverbial for an excessive complaisance which not infrequently leads without the limits of a manly independence. I admit that there is often occasion for reproach on this score, and it is a consciousness of the fact which leads some, as it did Abernethy, to affect an opposite extreme. Sycophancy is sometimes adopted as a means of currying favor, but the lack of an independent bearing is often the result of the trials of the first years of professional life. When these are considered, it is a wonder that the spirit is not oftener crushed out of sensitive minds. Let the young practitioner, however, while patiently waiting, hoping and striving for success, hold fast to his own self-respect. Let him neither seek nor receive with the feelings of a mendicant the patronage which he deserves. The physician who is well qualified to practice his profession, confers upon his patients more than he receives. I will go further and say that the physician who has conscientiously devoted for years his best efforts to the study of diseases with reference to their recog-

nition and management, availing himself of the latest developments of science, may indulge, in his own thoughts, the feeling that, in these days of rampant quackery, they are fortunate who have the good sense to elect his services; and his bearing should be in accordance with this sentiment.

It is a mistaken notion that success is compromised by frankness in the intercourse of physician and patient. A mysterious reserve is sometimes a convenient cloak for ignorance, but it does not impose upon any save the ignorant. It enhances respect and confidence with intelligent persons to express professional opinions with the utmost candor and plainness. It might be inferred that this line of policy was rarely followed, from the frequency with which we are urged by patients and their friends to say precisely what we think; but I believe the suspicion thus implied does injustice to the majority of the members of our profession. Most physicians are candid in their communications. In another point of view good policy, as well as propriety, dictates freedom from all reserve. I refer to a full understanding of the position which the physician holds in the confidence of his patients. It will now and then happen to the young, as it does also to the old, practitioner, that there are certain symptoms (to use a medical term) of want of confidence. Naturally enough the question sometimes arises in the minds of patients or friends, whether the physician is doing the best that can be done. Doubts are often suggested by officious neighbors or visitors, who assume to advocate the merits of other practitioners or the excellence of certain systems of practice. A careful observer will soon discern that something is wrong. From that moment he labors under a disadvantage; he cannot do full justice to himself and his patient. Let me advise you under these circumstances not to hesitate in demanding explicit information of the true state of affairs. You have a right to know how you stand. If there be only a little wavering, your decided tone of inquiry will perhaps serve to restore

confidence; if not, insist firmly, but kindly, upon retiring from the case. Unpleasant as this may be, you will thereby be spared much that is still more painful; you will preserve your self-respect and, in the end, your interests will not be damaged by pursuing this course. It is well to commence with the rule that you will never, willingly, continue to render your professional services when you have grounds for the belief that they are not received with satisfaction.

A word or two on the subject of pecuniary compensation. We are often rallied for a fondness for fees. I do not deem it worth while to undertake to defend the profession against an imputation of wishing to be well paid. It is evident enough that in many parts of our country medical practice is far from being lucrative. A shrewd observer would hardly counsel the choice of the medical profession as a means of money making—but not to enter into any discussion, I will simply ask why the physician should alone, of all mankind, be indifferent to this subject? Due attention to the subject is important to success. The usual custom in this country is not to place the fees for ordinary medical services on the footing of an *honorarium*, but to leave the amount of compensation to be fixed by the physician in accordance with the conventional rates of charges. In the charges for services rendered to those abundantly able to purchase them, you should not fail to do justice to the profession and to yourselves. This will the better enable you to exercise that liberality toward those who cannot compensate you, which is a precious privilege. An undue modesty or timidity in fixing the value of medical services, is a common fault of the young practitioner, however strange this assertion may appear to some; it is an error of policy, as well as personal injustice. If you would have your services properly appreciated, shun the appellation of a *cheap doctor*, for the community will be likely to accept the valuation which you place on your own abilities,

as judged by the standard by which the worth of most of the commodities of life is estimated, viz., the money which they cost.

I have thus, gentlemen, touched upon a few of the many points involved in the subject of professional success. But I have considered this subject, thus far, from a limited point of view. Your success will by no means be complete, if you merely succeed although ever so completely, in acquiring and retaining a good practice. The subject is to be considered as having a wider and higher scope than this. To be truly successful you must represent, in your professional attainments, the existing state of medical science. Assuming as we may do, that you are now qualified to enter the profession, you must keep pace with the profession as it advances in character and usefulness by means of constant developments in medical knowledge and improvements in its practical applications. Medicine is not stationary. It is actively progressing. As represented by the best practitioners at the present time, it is not now what it was within the memory of those of us who do not assume, as yet, to be veterans in the profession. It would be wrong to say that the present is peculiarly a transition-period in medical history. We cannot doubt that twenty-five years hence the evidence of progress will appear fully as great to those who commence their professional life on this day, as it appears now to those whose experience extends over a quarter of a century; and medicine twenty-five years ago was far in advance of its position at the remove of a half century. Never were a larger number of able and active minds more zealously and efficiently engaged in the advancement of medical science than at the present moment. Medicine will continue to advance, and the only question for you is, shall we be left behind in its onward march, or shall we advance with it. By representing, as far as practicable, the existing state of medical science, you do no more than justice to those who entrust to

you the most valuable of earthly interests—life and health—and you entitle yourselves to eminence in the profession.

Need I say that without accomplishing these objects, success is incomplete. And yet, regarded from this higher point of view, many are unsuccessful who do not lack practice, and who enjoy, to a greater or less extent, the confidence and respect of the community. In the medical profession, as in other walks of life, not a few cannot, or will not, appreciate the great fact of progress; and, hence, the profession abounds in members who may be distinguished by the title of *monumental physicians*. They represent not the present but the past! They are living monuments of former, stages of the career of science. They do not reflect science as it is, but perpetuate it as it has been. Remaining in a fixed position from the time when they entered the profession, they represent different periods of the past. A few are the living representatives of medicine as it was fifty years ago; some carry us backward a score of years, and others are only removed a single decade. While the progress of knowledge and art is onward, they are stationary, occupying always the same spot, with eyes reverted—"not remembering Lot's wife"! Our monumental brethren are not infrequently among those who decry the present system of medical instruction; finding fault with the schools for not adopting a higher standard of attainment for graduation. This is not the time and place for discussing the responsibility of professors for the admission into the profession of imperfectly educated graduates. But it is not inappropriate, in the present connection, to say that the subject of medical education has reference not to medical students only but to practitioners of medicine. The want of progressive studies after graduation is, to say the least, as crying an evil as defective preparation for practice. Much as our schools fall short of what they might be made to be, it would be of immense advantage to the profession if practitioners, old as well as young, resorted to them

much oftener than they do. As it is, our intelligent students contribute in no small measure to the improvement of the profession by reporting what they see and hear, and thereby inciting and directing the inquiries of those who stand to them in the relation of private teachers. In fact, it is not too much to say that the students and graduates from our schools go forth as missionaries to convert the stationary practitioners to faith in the new revelations of truth which are constantly taking place in the progress of medical knowledge! Let me express the hope, gentlemen, that of those whom I now address, none will ever be ranked among the *monumental physicians*. Begin your professional career with the conviction that constant progress is the law of this as of other departments of knowledge not springing directly from Divine revelation; and with the determination always to be found among those who represent its actual condition.

There is a still higher view of professional success, embracing objects to which some of you, I am sure, will not be indifferent. These are, pre-eminence for knowledge or skill, and enlargement of the boundaries of science by means of new discoveries or improvements. It is not presumption for you to place these objects before you at the outset of your career. It is your right, if not your duty, to strive for the vanguard of the profession. The science of medicine offers ample scope for useful labors and distinction. It is a golden district where the skilful, industrious miner cannot fail to bring to light hidden treasures. Success, regarded from this highest point of view, is attainable. The question for you to consider is simply this, shall it enter into your aims in life, and are you willing to employ the means necessary to secure it. Much might be said on this subject but I must content myself with a very few words. In striving for the distinction of being ranked among those who have contributed to the advancement of medical knowledge, never lose sight of the fact that the measure of

your success is to be adjudged by the medical profession. True professional reputation must be based on the opinions of your professional brethren. True it is that obstructions may arise from indifference, distrust and jealousy, but there is no other tribunal. We must be judged by our peers, and just claims to distinction, although they may be tardily recognized, will be sure to triumph in the end. A reputation coming from any other source than this, is spurious and cannot last.

Looking to the genuine source of a just distinction, bear constantly in mind the three great conditions of success. *First*, the desire—the aspiration—the *animus*—without which nothing will be accomplished, but which, in itself, can do no more than to place the mind in a state of fruitless expectancy. *Second*, a fixed and determined purpose which is neither to be diverted nor discouraged. And, *last*, patient, persevering labor—*labor* intermitted only to be renewed with increased energy—*labor* which at first submitted to perhaps with reluctance, soon becomes endeared by familiarity, and at length sweeter than life.

In now bringing these desultory remarks to a close, I beg to renew an expression of kind wishes on the part of the Regents, the Council and the Faculty of the long Island College Hospital. We hope that you will carry with you agreeable reminiscences of our young school, and of this beautiful city so admirably adapted to become the seat of educational institutions of all description. Sympathising with you in the joyousness with which you depart from us, and in the warm greetings which await you at your homes, we bid you God-speed; and may your future success fulfil the highest aspirations with which you this day enroll yourselves among the members of our noble profession!

Long Island College Hospital.

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DEMONSTRATOR OF ANATOMY.

GEO. K. SMITH, M. D.

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CHAS. C. GORDON	Florida, Key West
NEEMIAS COLE	Cedar Hill, Ohio
RUFUS K. BROWNE	New York N. Y.
GEO. R. WHITE	.....	Versailles, Ky.
FOWLER PRENTICE	.....	Brooklyn, N. Y.
WM. J. McMAHON	.....	Courtland, Ala.
EDMUND LYNCH	.....	Brooklyn, N. Y.
RUFUS A. SHIMPOCK	.....	Mt. Pleasant, N. C.
JAMES P. WEBB	.....	Windham, Me.
EMILE T. SABAL	.....	Jacksonville, Fla.
PHILO C. PEASE	.....	Bronxville, N. Y.
CHAS. J. LEARY, A. M.,	.....	Cincinnati, Ohio.
GEO. L. KIRBY	.....	Clinton, N. C.
LUCIEN DAMAINVILLE	.....	Buffalo, N. Y.
PAUL A. BARRER	.....	Mt. Pleasant, N. C.
JNO. S. SCUDDER	.....	Vallore, India.